



ifw 1714

In re Application

Docket No. 02589.000600

EUN KYOUNG KIM, ET AL.

Application No.: 09/892,655

Examiner: Kriellion A. Sanders

Filed: June 28, 2001

Group Art Unit: 1714

For: PHOTOCROMIC DIARYLETHENE  
SUBSTITUTED WITH ISOXAZOLE GROUP

Date: May 24, 2004

Mail Stop Amendment  
THE COMMISSIONER FOR PATENTS  
P.O. Box 1450  
Alexandria, VA 22313-1450

Sir:

Transmitted herewith is an Amendment in the above-identified application.

☒ No additional fee is required.

The fee has been calculated as shown below

| CLAIMS AS AMENDED                              |  |       |  |                         |                |                   |
|--|--|-------|--|-------------------------|----------------|-------------------|
|  | (2)<br>CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |       | (4)<br>HIGHEST NO.<br>PREVIOUSLY<br>PAID FOR | (5)<br>PRESENT<br>EXTRA | RATE           | ADDITIONAL<br>FEE |
| TOTAL<br>CLAIMS                                | *<br>3   | MINUS | **<br>10                                     | =<br>0                  | x \$9<br>\$18  | \$0.00            |
| INDEP.<br>CLAIMS                               | *<br>2   | MINUS | ***<br>2                                     | =<br>0                  | x \$43<br>\$86 | \$0.00            |
| Fee for Multiple Dependent claims \$145°/\$290 |  |       |  |                         |                |                   |
| TOTAL ADDITIONAL FEE<br>FOR THIS AMENDMENT---  |  |       |  |                         |                | \$0.00            |

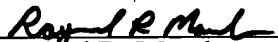
\* If the entry in Column 2 is less than the entry in Column 4, write "0" in Column 5.

\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.

\*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space.

- ☐ Verified Statement claiming small entity status is enclosed, if not filed previously.
- ☐ A check in the amount of \$\_\_\_\_\_ is enclosed.
- ☐ Charge \$\_\_\_\_\_ to Deposit Account No. 06-1205. A duplicate copy of this sheet is enclosed.
- ☒ Any prior general authorization to charge an issue fee under 37 C.F.R. 1.18 to Deposit Account No. 06-1205 is hereby revoked. The Commissioner is hereby authorized to charge any additional fees under 37 C.F.R. 1.16 and 1.17 which may be required during the entire pendency of this application, or to credit any overpayment, to Deposit Account No. 06-1205. A duplicate copy of this paper is enclosed.
- ☐ A check in the amount of \$\_\_\_\_\_ to cover the fee for a \_\_\_\_\_ month extension is enclosed.
- ☐ A check in the amount of \$\_\_\_\_\_ to cover the Information Disclosure Statement fee is enclosed.
- ☒ Applicants' undersigned attorney may be reached in our New York office by telephone at (212) 218-2100. All correspondence should continue to be directed to our address given below.

Respectfully submitted,

  
Raymond R. Mandra  
Attorney for Applicants  
Registration No. 34,382

FITZPATRICK, CELLA, HARPER & SCINTO  
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Form #120

NY\_MAIN 384106v2

02589.000600



PATENT APPLICATION

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

|                             |   |                                |
|-----------------------------|---|--------------------------------|
| In re Application of:       | ) |                                |
|                             | : | Examiner: Kriellion A. Sanders |
| EUN KYOUNG KIM, ET AL.      | ) |                                |
|                             | : | Group Art Unit: 1714           |
| Application No.: 09/892,655 | ) |                                |
|                             | : |                                |
| Filed: June 28, 2001        | ) |                                |
|                             | : |                                |
| For: PHOTOCHROMIC           | ) |                                |
| DIARYLETHENE SUBSTITUTED    | : |                                |
| WITH ISOXAZOLE GROUP        | ) | May 24, 2004                   |

Mail Stop Amendment  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

RESPONSE TO OFFICE ACTION

Sir:

This is in response to the Office Action dated February 25, 2004. It is believed that no fees are due at this time. However, in the event there are fees due or overpayments made, please charge any fees and credit any overpayment to Deposit Account 06-1205.

Please amend the above-identified application as follows.

Please amend Claims 1-2 as follows without prejudice. Please add new Claim 11.

Claims 3-10 have been withdrawn. In accordance with the revised amendment format, a complete listing of all claims follows; this listing replaces all earlier amendments and listings of the claims. Applicants reserve the right to file divisional applications directed to all non-elected claims.